County: Florence FLORENCE VILLA 1000 CHAPIN STREET FLORENCE 5 FLORENCE 54121 Phone: (715) 528-4833
Operated from 1/1 To 12/31 Days of Operation: 366
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/00): 74
Total Licensed Bed Capacity (12/31/00): 74
Number of Residents on 12/31/00: 63 Ownership: Highest Level License: Operate in Conjunction with CBRF? Title 18 (Medicare) Certified? Average Daily Census: Corporati on Skilled No Yes 67

Services Provided to Non-Residents	Į	Age, Sex, and Primary Diagn	osis of	Residents (12/31	/00)	Length of Stay (12/31/00)	%
Home Health Care Supp. Home Care-Personal Care	No No	Primary Diagnosis	% 	Age Groups		Less Than 1 Year 1 - 4 Years	42. 9 34. 9
Supp. Home Care-Household Services	No	Developmental Disabilities	3. 2	Under 65	3. 2	More Than 4 Years	22. 2
Day Servi ces	No	Mental Illness (Org./Psy)	3. 2	65 - 74	12. 7		
Respite Care	No	Mental Illness (Other)	15. 9	75 - 84	30. 2		100. 0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	46. 0	****************	******
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	4.8	95 & 0ver	7. 9	Full-Time Equivaler	ıt
Congregate Meals	No	Cancer	4.8			Nursing Staff per 100 Re	esi dents
Home Delivered Meals	No	Fractures	4.8		100.0	(12/31/00)	
Other Meals	No	Cardi ovascul ar	36. 5	65 & 0ver	96. 8	(
Transportation	No	Cerebrovascul ar	17. 5			RNs	13. 6
Referral Service	No	Di abetes	6. 3	Sex	%	LPNs	2. 9
Other Services	Yes	Respi ratory	3. 2			Nursing Assistants	
Provi de Day Programming for		Other Medical Conditions	0. 0	Male	22. 2	Aides & Orderlies	30. 1
Mentally Ill	No			Female	77. 8		
Provi de Day Programming for	1		100. 0				
Developmentally Disabled	No				100. 0		

Method of Reimbursement

	Medicare (Title 18)				Medicaid (Title 19)			0ther			Private Pay			Manageo	l Care		Percent
			Per Die	m		Per Die	m		Per Die	m		Per Diem	1	Ĭ	Per Diem	Total	Of All
Level of Care	No.	%	Rate	No.	%	Rate	No.	%	Rate	No	. %	Rate	No.	%	Rate	No.	Resi dents
Int. Skilled Care	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0%
Skilled Care	12		\$193. 16	38	95. 0	\$85. 68	ŏ	0. 0	\$0.00	11		\$121.73	ŏ	0. 0	\$0.00	61	96. 8%
Intermediate				2	5.0	\$73. 85	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	2	3. 2%
Limited Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Dev. Di sabl ed				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Traumatic Brain Inj	. 0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Depender	nt 0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	12	100.0		40	100.0		0	0.0		11	100.0		0	0.0		63	100.0%

Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00 Admissions, Discharges, and Deaths During Reporting Period % Needi ng Total Assistance of Percent Admissions from: Activities of % Totally Number of Private Home/No Home Health 3.4 Daily Living (ADL) Independent One Or Two Staff Dependent Resi dents Private Home/With Home Health 1. 1 Baťhi ng **0**. 0 73. 0 27. 0 63 22. 2 Other Nursing Homes 2.3 **Dressing** 58. 7 19. 0 63 Acute Care Hospitals
Psych. Hosp. - MR/DD Facilities
Rehabilitation Hospitals Transferring 42.9 63 93. 1 31.7 25.4 41.3 63 0.0 Toilet Use 33. 3 25.4 0.0 Eating 85. 7 4. 8 9. 5 63 ****** Other Locations 0.0 Total Number of Admissions 87 Continence Special Treatments Receiving Respiratory Care
Receiving Tracheostomy Care
Receiving Suctioning
Receiving Ostomy Care Indwelling Or External Catheter Percent Discharges To: 4.8 6. 3 Occ/Freq. Incontinent of Bladder Private Home/No Home Health 7.4 42.9 0.0 Private Home/With Home Health 29.5 Occ/Freq. Incontinent of Bowel 0.0 17. 5 Other Nursing Homes 10. 5 1.6 Acute Care Hospitals
Psych. Hosp. - MR/DD Facilities
Rehabilitation Hospitals Receiving Tube Feeding Receiving Mechanically Altered Diets 13. 7 Mobility 1.6 Physically Restrained 0.0 0.0 30. 2 0.0 Other Locations 0.0 Skin Care Other Resident Characteristics 38. 9 1.6 Deaths With Pressure Sores Have Advance Directives 60.3 Total Number of Discharges With Rashes Medications 1.6 Receiving Psychoactive Drugs (Including Deaths) 41.3

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

		Ownershi p:		Bed Size:		Li censure:			
	This Propriet		ori etary	50- 99		Skilled		Al l	
	Facility	Peer Group		Peer	Group	Peer Group		Facilities	
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	90. 5	80. 4	1. 13	85. 4	1.06	84. 1	1.08	84. 5	1.07
Current Residents from In-County	28. 6	74. 2	0. 39	72. 9	0. 39	76. 2	0. 38	77. 5	0.37
Admissions from In-County, Still Residing	9. 2	19. 0	0. 48	21. 3	0.43	22. 2	0.41	21. 5	0.43
Admi ssi ons/Average Daily Census	129. 9	135. 3	0. 96	101. 3	1. 28	112. 3	1. 16	124. 3	1.05
Discharges/Average Daily Census	141.8	137. 7	1. 03	101. 3	1.40	112. 8	1. 26	126. 1	1. 12
Discharges To Private Residence/Average Daily Census	52. 2	57. 0	0. 92	37. 6	1. 39	44. 1	1. 18	49. 9	1.05
Residents Receiving Skilled Care	96. 8	89. 4	1. 08	89. 6	1.08	89. 6	1.08	83. 3	1. 16
Residents Aged 65 and Older	96. 8	95. 9	1. 01	93. 4	1.04	94. 3	1.03	87. 7	1. 10
Title 19 (Medicaid) Funded Residents	63. 5	71.6	0.89	69. 0	0. 92	70. 1	0. 91	69. 0	0. 92
Private Pay Funded Residents	17. 5	19. 0	0. 92	23. 2	0. 75	21. 4	0.82	22. 6	0. 77
Developmentally Disabled Residents	3. 2	1. 2	2. 61	0. 9	3. 38	0. 9	3. 46	7. 6	0.42
Mentally Ill Residents	19. 0	35. 9	0. 53	41.5	0.46	39. 6	0. 48	33. 3	0. 57
General Medical Service Residents	0.0	18. 2	0.00	15. 4	0.00	17. 0	0.00	18. 4	0.00
Impaired ADL (Mean)	41. 9	47. 3	0.89	47. 7	0. 88	48. 2	0.87	49. 4	0.85
Psychological Problems	41. 3	45.0	0. 92	51.3	0.81	50.8	0.81	50. 1	0.82
Nursing Care Required (Mean)	5. 4	6. 7	0. 80	6. 9	0. 77	6. 7	0. 80	7. 2	0.75